

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Mary Thomas for Congress

ADDRESS (number and street)

3689 Coolidge Court

Suite 6

☒ Check if different
than previously
reported. (ACC)

Tallahassee

FL

32311

2. FEC IDENTIFICATION NUMBER ▼

C C00581397

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

FL

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☒

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

10

D D / Y Y Y Y

01

Y Y Y Y

2015

through

M M / D D / Y Y Y Y

12

D D / Y Y Y Y

31

Y Y Y Y

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer John Konkus

Signature of Treasurer John Konkus

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

30

Y Y Y Y

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Mary Thomas for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	84732.38	260292.15
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	84732.38	260292.15
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	25299.29	67636.87
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	25299.29	67636.87
8. Cash on Hand at Close of Reporting Period (from Line 27).....	237655.28	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	45000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 85

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Mary Thomas for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

74104.78

229806.36

(ii) Unitemized.....

8127.60

19715.99

(iii) TOTAL of contributions from individuals ▶

82232.38

249522.35

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

2500.00

2500.00

(d) The Candidate.....

0.00

8269.80

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

84732.38

260292.15

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

20000.00

45000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

20000.00

45000.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

104732.38

305292.15

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	25299.29	67636.87
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	25299.29	67636.87

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	158222.19
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	104732.38
25. SUBTOTAL (add Line 23 and Line 24).....	262954.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	25299.29
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	237655.28

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 85
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Mary Thomas for Congress

Full Name (Last, First, Middle Initial) A. Christopher Antley		Date of Receipt M M / D D / Y Y Y Y Y 12 30 2015
Mailing Address 1981 Charlais Street		Transaction ID : SA11AI.5561
City Tallahassee	State FL	Zip Code 32317
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Idea paint	Occupation Sales Manager	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

Full Name (Last, First, Middle Initial) B. Beverly Austin		Date of Receipt M M / D D / Y Y Y Y Y 10 26 2015
Mailing Address 4617 San Miguel Street		Transaction ID : SA11AI.4981
City Tampa	State FL	Zip Code 33629
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer None	Occupation Retired	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Sudhir Bhaskar		Date of Receipt M M / D D / Y Y Y Y Y 12 31 2015
Mailing Address 9048 Great Heron Circle		Transaction ID : SA11AI.5858
City Orlando	State FL	Zip Code 32836
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Central FL Gastroenterology	Occupation Physician	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Michael Bianculli

Mailing Address 5 590 SW 28th Ave.

City

Ocala

State

FL

Zip Code

34471

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bianculli Investment Inc.

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

Transaction ID : SA11AI.5499

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Richard Bianculli

Mailing Address 545 SE 151st Place

City

Ocala

State

FL

Zip Code

34480

FEC ID number of contributing
federal political committee.

C

Name of Employer

Richmond Hill Capital Partners

Occupation

Director

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

Transaction ID : SA11AI.5674

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Brandon Boyd

Mailing Address 2545 Ulysses Road

City

Tallahassee

State

FL

Zip Code

32312

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Farmer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2015

Transaction ID : SA11AI.5447

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. Joe Bradshaw

Mailing Address 2220 Mill Creek Circle

City

Ocala

State

FL

Zip Code

34471

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2015

Transaction ID : SA11AI.5171

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Elizabeth Burgess

Mailing Address 6746 Gaines Ferry Road

City

Flowery Branch

State

GA

Zip Code

30542

FEC ID number of contributing
federal political committee.

C

Name of Employer

FloridaDreamPainter.com

Occupation

Artist/Painter

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : SA11AI.5559

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Benita Byrd

Mailing Address 1327 NE Mandarin Road

City

Branford

State

FL

Zip Code

32009

FEC ID number of contributing
federal political committee.

C

Name of Employer

TW Byrd Logging

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2015

Transaction ID : SA11AI.5746

Amount of Each Receipt this Period

2250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Scottie Campbell

Mailing Address P.O. Box 644480

City

Vero Beach

State

FL

Zip Code

32964

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 10 2015

Transaction ID : SA11AI.5059

Amount of Each Receipt this Period

2700.00

Full Name (Last, First, Middle Initial)

Scottie Campbell

Mailing Address P.O. Box 644480

City

Vero Beach

State

FL

Zip Code

32964

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 30 2015

Transaction ID : SA11AI.5659

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Richard Canary

Mailing Address 1795 McCauley Road

City

Clearwater

State

FL

Zip Code

33765

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 03 2015

Transaction ID : SA11AI.5497

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Bernadette Castro

Mailing Address 17 Quail hill Road

City

Huntington

State

NY

Zip Code

11743

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Real Estate

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

Transaction ID : SA11AI.5763

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Bernadette Castro

Mailing Address 17 Quail hill Road

City

Huntington

State

NY

Zip Code

11743

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Real Estate

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

Transaction ID : SA11AI.5765

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Ravi Chandra

Mailing Address 1920 SW 20th Place

City

Ocala

State

FL

Zip Code

34471

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2015

Transaction ID : SA11AI.5712

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Zenna Corbin

Mailing Address 1615 Oakgrove Road

City

Chipley

State

FL

Zip Code

32428

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chipley Gun and Pawn

Occupation

President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.5307

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

James Corry

Mailing Address 90 Kentucky Ave.

City

Lynn Haven

State

FL

Zip Code

32444

FEC ID number of contributing
federal political committee.

C

Name of Employer

Eye Center of North Florida

Occupation

Optometrist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		30		2015

Transaction ID : SA11AI.5661

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Archala Dara

Mailing Address Unknown

City

Orlando

State

FL

Zip Code

32828

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

N/A

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.5754

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 85

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Morrell Deen

Mailing Address 2836 SE 25th Terrace

City

Ocala

State

FL

Zip Code

34471

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
12 10 2015

Transaction ID : SA11AI.5680

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Frank Deluca

Mailing Address 1718 SW College Road

City

Ocala

State

FL

Zip Code

34471

FEC ID number of contributing
federal political committee.

C

Name of Employer

DeLuca Toyota

Occupation

President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
12 28 2015

Transaction ID : SA11AI.5836

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Sammy Dixon

Mailing Address 3409 Blue Quill Lane

City

Tallahassee

State

FL

Zip Code

32313

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prime Meridian Bank

Occupation

Banker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
12 31 2015

Transaction ID : SA11AI.5319

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Thomas Dobbins

Mailing Address P.O. Box 6211

City

Ocala

State

FL

Zip Code

34478

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

Transaction ID : SA11AI.5684

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Dale Doss

Mailing Address 1636 Woodgate Way

City

Tallahassee

State

FL

Zip Code

32308

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Transaction ID : SA11AI.4985

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Patrick Douglas

Mailing Address 177 NW Madison Street

City

Lake City

State

FL

Zip Code

32055

FEC ID number of contributing
federal political committee.

C

Name of Employer
Douglas and CarterOccupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : SA11AI.5840

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Dr. Sameh Elamir

Mailing Address 1213 Savannah Drive

City

Panama City

State

FL

Zip Code

32405

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2015

Transaction ID : SA11AI.5589

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Mick Emami

Mailing Address 5723 Westshore Drive

City

New Port Richey

State

FL

Zip Code

34652

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.5874

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Don Everett Jr.

Mailing Address 200 Bishop Blvd

City

Perry

State

FL

Zip Code

32347

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ware Oil & Supply Company Inc.

Occupation

President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2015

Transaction ID : SA11AI.5583

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Ronald Ewers

Mailing Address 535 SE 22nd Ave.

City

Ocala

State

FL

Zip Code

34471

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

Transaction ID : SA11AI.5682

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C.G. Farmer

Mailing Address 7021 Anglewood Lane

City

Tallahassee

State

FL

Zip Code

32309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blue Mountain LLC

Occupation

Business Services

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : SA11AI.5639

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Della Fordham

Mailing Address 6472 Hidden Lakes Drive

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2015

Transaction ID : SA11AI.4949

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1050.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Lee Fordham

Mailing Address 6472 Hidden Lakes Drive

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		07		2015

Transaction ID : SA11AI.4947

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Laura Forster

Mailing Address 8077 Archer Circle

City

Tallahassee

State

FL

Zip Code

32309

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
N/A

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		30		2015

Transaction ID : SA11AI.5641

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

Priya Ghuman

Mailing Address 1424 SE 5th Street

City

Ocala

State

FL

Zip Code

34471

FEC ID number of contributing
federal political committee.

C

Name of Employer
DCCAOccupation
President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2015

Transaction ID : SA11AI.4953

Amount of Each Receipt this Period

1700.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

William Gilmore

A.

Mailing Address 4581 Forest Park Drive

City

Marianna

State

FL

Zip Code

32556

FEC ID number of contributing
federal political committee.

C

Name of Employer

Walmart

Occupation

Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		23		2015

Transaction ID : SA11AI.5744

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Mallie Goostree

B.

Mailing Address 208 South Cove Terrace Drive

City

Panama City

State

FL

Zip Code

32401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		16		2015

Transaction ID : SA11AI.5595

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Diane Gowski

C.

Mailing Address 1383 Temple Street

City

Clearwater

State

FL

Zip Code

33766

FEC ID number of contributing
federal political committee.

C

Name of Employer

Veterans Administration

Occupation

Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		09		2015

Transaction ID : SA11AI.5670

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Pierce Graney

Mailing Address 8513 Trade Winds Drive

City

Port Saint Joe

State

FL

Zip Code

32456

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Businessowner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2015

Transaction ID : SA11AI.5593

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Lynetta Griner

Mailing Address P.O. Drawer 1819

City

Chiefland

State

FL

Zip Code

32644

FEC ID number of contributing
federal political committee.

C

Name of Employer
Usher Land and TimberOccupation
Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2015

Transaction ID : SA11AI.5666

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Jan Henderson

Mailing Address 3731 NW 150th Street

City

Trenton

State

FL

Zip Code

32693

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alliance DairiesOccupation
CFO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2015

Transaction ID : SA11AI.5633

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Paul Jallo

Mailing Address 290 Tall Oak Trail

City

Tarpon Springs

State

FL

Zip Code

34685

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jallo Oil

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		23		2015

Transaction ID : SA11AI.5599

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Randolph Klein

Mailing Address 333 N.W. 3rd Ave.

City

Ocala

State

FL

Zip Code

34475

FEC ID number of contributing
federal political committee.

C

Name of Employer

Klein and Klein

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2015

Transaction ID : SA11AI.4989

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Randolph Klein

Mailing Address 333 N.W. 3rd Ave.

City

Ocala

State

FL

Zip Code

34475

FEC ID number of contributing
federal political committee.

C

Name of Employer

Klein and Klein

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

Transaction ID : SA11AI.5603

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Keith Knorr

A.

Mailing Address P.O. Box 1369

City

Ocala

State

FL

Zip Code

34478

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		10		2015

Transaction ID : SA11AI.5686

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Colleen Koch

B.

Mailing Address 1320 Bayou Court

City

Panama City

State

FL

Zip Code

32401

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.5850

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

Vijay Koka

C.

Mailing Address 3591 SW 26th Ave.

City

Ocala

State

FL

Zip Code

34471

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiovascular Inst.Occupation
Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		10		2015

Transaction ID : SA11AI.5678

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Sai Konda

Mailing Address 3682 Mossycreek Lane

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C

Name of Employer

DDC

Occupation

Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2015

Transaction ID : SA11AI.5714

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Jacqueline Konkus

Mailing Address 17116 Chiswell Road

City

Poolesville

State

MD

Zip Code

20837

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2015

Transaction ID : SA11AI.5565

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Jacqueline Konkus

Mailing Address 17116 Chiswell Road

City

Poolesville

State

MD

Zip Code

20837

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2015

Transaction ID : SA11AI.5567

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 21 OF 85
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Mary Thomas for Congress

Full Name (Last, First, Middle Initial) A. Jacqueline Konkus		Date of Receipt M M / D D / Y Y Y Y Y 12 / 23 / 2015	
Mailing Address 17116 Chiswell Road		Transaction ID : SA11AI.5175	
City Poolesville	State MD		Zip Code 20837
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	Amount of Each Receipt this Period 600.00	

Full Name (Last, First, Middle Initial) B. Jacqueline Konkus		Date of Receipt M M / D D / Y Y Y Y Y 12 / 23 / 2015	
Mailing Address 17116 Chiswell Road		Transaction ID : SA11AI.5569	
City Poolesville	State MD		Zip Code 20837
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3200.00	Amount of Each Receipt this Period 500.00	

Full Name (Last, First, Middle Initial) C. John konkus Sr.		Date of Receipt M M / D D / Y Y Y Y Y 12 / 23 / 2015	
Mailing Address 17116 Chiswell Road		Transaction ID : SA11AI.5577	
City Poolesville	State MD		Zip Code 20837
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	Amount of Each Receipt this Period 900.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Bala Krishna

Mailing Address 3550 SW 26th Ave.

City

Ocala

State

FL

Zip Code

34471

FEC ID number of contributing
federal political committee.

C

Name of Employer

FL Dept. of Health

Occupation

Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

Transaction ID : SA11AI.5690

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Jennifer Kuyrkendall

Mailing Address 182 NW Lakeside Court

City

Lake City

State

FL

Zip Code

32055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Office of State Court Commissi

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2015

Transaction ID : SA11AI.5774

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

John Littel

Mailing Address 6619 NW 54th Loop

City

Ocala

State

FL

Zip Code

34482

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2015

Transaction ID : SA11AI.5750

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 85

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Dr. Manuel Lopez

Mailing Address 9471 SW 97th Street

City

Miami

State

FL

Zip Code

33176

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2015

Transaction ID : SA11AI.5571

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

B. Fernando MalamudMailing Address 2202 State Ave.
Suite 111

City

Panama City

State

FL

Zip Code

32405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Panhandle Cancer CenterOccupation
Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2015

Transaction ID : SA11AI.4993

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Greg Marr

Mailing Address 236 Nabb Loop

City

Tallahassee

State

FL

Zip Code

32317

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retried

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : SA11AI.5575

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. Paresh Master

Mailing Address 2530 Ulysses Road

City

Tallahassee

State

FL

Zip Code

32312

FEC ID number of contributing
federal political committee.

C

Name of Employer

SSM Hospitality

Occupation

Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		13		2015

Transaction ID : SA11AI.5809

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Patria Maulden

Mailing Address 102 Harbor Point Drive

City

Lynn Haven

State

FL

Zip Code

32444

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2015

Transaction ID : SA11AI.5828

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Charles Maulsby

Mailing Address P.O. Box 433

City

Greenville

State

FL

Zip Code

32331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Florida Plywoods, Inc.

Occupation

Vice President/Secretary

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		14		2015

Transaction ID : SA11AI.5581

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Dr. David McKalip

Mailing Address 1078 42nd Ave. North

City

St. Petersburg

State

FL

Zip Code

33703

FEC ID number of contributing
federal political committee.

C

Name of Employer

David M. McKalip, M.D.

Occupation

Neurological Surgeon

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

512.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : SA11AI.5424

Amount of Each Receipt this Period

262.58

In-kind - Food and drinks for fundraiser

Full Name (Last, First, Middle Initial)

Prashant Mehta

Mailing Address 3182 Coneflower Drive

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kyra Info Tech Inc.

Occupation

Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2015

Transaction ID : SA11AI.5495

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Helen Middlebrooks

Mailing Address 796 Live Oak Plantation

City

Tallahassee

State

FL

Zip Code

32312

FEC ID number of contributing
federal political committee.

C

Name of Employer

M. South Corp

Occupation

Officer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2015

Transaction ID : SA11AI.5740

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3012.58

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Joseph D. Mitchell

Mailing Address 251 Remington Green Circle

City

Tallahassee

State

FL

Zip Code

32308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Summit Care

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : SA11AI.5463

Amount of Each Receipt this Period

300.00

In-kind - Food and beverage for fundraiser

Full Name (Last, First, Middle Initial)

Joseph D. Mitchell

Mailing Address 251 Remington Green Circle

City

Tallahassee

State

FL

Zip Code

32308

FEC ID number of contributing
federal political committee.

C

Name of Employer

Summit Care

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : SA11AI.5485

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Shishir More

Mailing Address 3060 Indian Grass Lane

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

IT Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2015

Transaction ID : SA11AI.5710

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1550.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Hashem Mubarak

Mailing Address 3317 Harbour Place

City

Panama City

State

FL

Zip Code

32405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiology AssociatesOccupation
Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		20		2015

Transaction ID : SA11AI.5625

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Dr. Hasan Murshed

Mailing Address 528 Bunkers Cove

City

Panama City

State

FL

Zip Code

32401

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		30		2015

Transaction ID : SA11AI.5563

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Anadan Niravel

Mailing Address 9026 NW 24th Ct.

City

Coral Springs

State

FL

Zip Code

33065

FEC ID number of contributing
federal political committee.

C

Name of Employer
ABA Enterprises IncOccupation
President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		18		2015

Transaction ID : SA11AI.5623

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

George Norris

Mailing Address P.O. Box 16118

City

Panama City

State

FL

Zip Code

32406

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Norris Agency

Occupation

Agent

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 11 2015

Transaction ID : SA11AI.5591

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Carolyn Parlato

Mailing Address 1529 Crestview Ave.

City

Tallahassee

State

FL

Zip Code

32303

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 12 2015

Transaction ID : SA11AI.5465

Amount of Each Receipt this Period

275.00

In-kind - food and beverage for meet and greet

Full Name (Last, First, Middle Initial)

Bhavikkumar Patel

Mailing Address 2400 Rain Lily Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kyra Solutions

Occupation

Applications Architect

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 12 2015

Transaction ID : SA11AI.5489

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1025.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Jashuben Patel

Mailing Address 2020 Appalachee Parkway

City

Tallahassee

State

FL

Zip Code

32301

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Hotlier

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

251.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2015

Transaction ID : SA11AI.5708

Amount of Each Receipt this Period

251.00

Full Name (Last, First, Middle Initial)

Jaydeep Patel

Mailing Address 1523 Eagle Ridge Drive

City

Tallahassee

State

FL

Zip Code

32312

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kyra SolutionsOccupation
Management Executive

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2015

Transaction ID : SA11AI.5811

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Nitinkumar Patel

Mailing Address 3064 Indian Grass Lane

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2015

Transaction ID : SA11AI.5487

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

751.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Pareshkumar Patel**A.**

Mailing Address 4945 Hollystone Lane

City

Tallahassee

State

FL

Zip Code

32312

FEC ID number of contributing
federal political committee.

C

Name of Employer

Florida Cancer Specialists

Occupation

Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2015

Transaction ID : SA11AI.5716

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Piyush Patel**B.**

Mailing Address 1974 Heritate Estates Drive

City

Lakeland

State

FL

Zip Code

33803

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kyra Solutions

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2015

Transaction ID : SA11AI.5493

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Larry Perry**C.**

Mailing Address 5431 Hopetown Lane

City

Panama City

State

FL

Zip Code

32406

FEC ID number of contributing
federal political committee.

C

Name of Employer

Perry and Young, PA

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2015

Transaction ID : SA11AI.5116

Amount of Each Receipt this Period

2700.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Pamela Perry

Mailing Address 5431 Hopetown Lane

City

Panama City

State

FL

Zip Code

32408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Beachside Interiors

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
10 12 2015

Transaction ID : SA11AI.4970

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Pamela Perry

Mailing Address 5431 Hopetown Lane

City

Panama City

State

FL

Zip Code

32408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Beachside Interiors

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1645.12

Date of Receipt

M M / D D / Y Y Y Y
12 01 2015

Transaction ID : SA11AI.5426

Amount of Each Receipt this Period

645.12

In-kind - food and drinks for fundraiser

Full Name (Last, First, Middle Initial)

Pamela Perry

Mailing Address 5431 Hopetown Lane

City

Panama City

State

FL

Zip Code

32408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Beachside Interiors

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.12

Date of Receipt

M M / D D / Y Y Y Y
12 14 2015

Transaction ID : SA11AI.5120

Amount of Each Receipt this Period

1055.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2700.12

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Pamela Perry

Mailing Address 5431 Hopetown Lane

City

Panama City

State

FL

Zip Code

32408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Beachside Interiors

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3945.12

Date of Receipt

M M / D D / Y Y Y Y Y
12 14 2015

Transaction ID : SA11AI.5601

Amount of Each Receipt this Period

1245.00

Full Name (Last, First, Middle Initial)

Harsha Pipalia

Mailing Address 14014 Shady Shores Drive

City

Tampa

State

FL

Zip Code

33613

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cypress Medical

Occupation
Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 18 2015

Transaction ID : SA11AI.5164

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Donald Quincey Jr.

Mailing Address 2350 NW 120th Street

City

Chiefland

State

FL

Zip Code

32626

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Cattleman

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 10 2015

Transaction ID : SA11AI.5075

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3245.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Dr. Seela Ramesh

Mailing Address 2628 Teton Stone Run

City

Orlando

State

FL

Zip Code

32828

FEC ID number of contributing
federal political committee.

C

Name of Employer

Digestive & Liver Center of FL

Occupation

Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.5198

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

Randy Ray

Mailing Address 5028 Centennial Oak Circle

City

Tallahassee

State

FL

Zip Code

32308

FEC ID number of contributing
federal political committee.

C

Name of Employer

North FL Baptist Church

Occupation

Pastor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : SA11AI.5838

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Francis Rentz

Mailing Address 2065 THomasville Road
Suite 1

City

Tallahassee

State

FL

Zip Code

32308

FEC ID number of contributing
federal political committee.

C

Name of Employer

SouthLand Commercial Advisors

Occupation

Commercial Real Estate

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : SA11AI.5585

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Sr. Fred Roberts

Mailing Address P.O. Box 1930

City

Ocala

State

FL

Zip Code

34478

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Businessman

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		10		2015

Transaction ID : SA11AI.5688

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Jason Rosenberg

Mailing Address 7117 NW 20th Place

City

Gainesville

State

FL

Zip Code

32605

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Orthopaedic InstOccupation
Surgeon

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : SA11AI.5852

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Deepti Sadhwani

Mailing Address 12920 US HWY 1

City

Sebastian

State

FL

Zip Code

32958

FEC ID number of contributing
federal political committee.

C

Name of Employer
Quality Health CareOccupation
Medical Doctor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		04		2015

Transaction ID : SA11AI.5631

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Azim Saju

Mailing Address 5745 SW 42nd Place

City

Ocala

State

FL

Zip Code

34474

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Hotelier

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2015

Transaction ID : SA11AI.5732

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Navroz Saju

Mailing Address 5765 SW 42nd Place

City

Ocala

State

FL

Zip Code

34474

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Hotlier

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2015

Transaction ID : SA11AI.5730

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Herman Sanchez

Mailing Address 479 NE 446th Street

City

Old Town

State

FL

Zip Code

32680

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sanchez FarmOccupation
Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2015

Transaction ID : SA11AI.5150

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Daryl Sandlin

Mailing Address 1327 NE Mandarin Road

City

Branford

State

FL

Zip Code

32008

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Agriculture

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2015

Transaction ID : SA11AI.5183

Amount of Each Receipt this Period

2250.00

Full Name (Last, First, Middle Initial)

Howard Shapiro

Mailing Address 6997 Hearland Circle

City

Tallahassee

State

FL

Zip Code

32312

FEC ID number of contributing
federal political committee.

C

Name of Employer
Legacy InsuranceOccupation
CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : SA11AI.5786

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

George Shuman

Mailing Address 1700 SE 52nd Court

City

Ocala

State

FL

Zip Code

34471

FEC ID number of contributing
federal political committee.

C

Name of Employer
Asgardia Inc.Occupation
Business

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2015

Transaction ID : SA11AI.5790

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Jeffrey and Jamie Siegmeister

Mailing Address 2637 145th Road

City

Live Oak

State

FL

Zip Code

32060

FEC ID number of contributing
federal political committee.

C

Name of Employer

State of Florida

Occupation

State Attorney, 3rd Circuit

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1028.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		17		2015

Transaction ID : SA11AI.5430

Amount of Each Receipt this Period

1028.08

In-kind - Food, beverage and invitations for meet and greet

Full Name (Last, First, Middle Initial)

Todd Sparks

Mailing Address 2205 Grant Ave
Suite E

City

Panama City

State

FL

Zip Code

32405

FEC ID number of contributing
federal political committee.

C

Name of Employer

GTS Entertainment

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		01		2015

Transaction ID : SA11AI.5792

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

J.O. Stewart

Mailing Address 1511 Michigan Avenue

City

Panama City

State

FL

Zip Code

32401

FEC ID number of contributing
federal political committee.

C

Name of Employer

RV Connections

Occupation

President RV Sales and Service

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		15		2015

Transaction ID : SA11AI.5734

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2528.08

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

James Stiles

Mailing Address 1921 Greenwood Drive

City

Tallahassee

State

FL

Zip Code

32303

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cherokee Properties, Inc.

Occupation

President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 30 / 2015

Transaction ID : SA11AI.5597

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

Hon. Charlie Stone

Mailing Address 5170 NW 110th Ave

City

Ocala

State

FL

Zip Code

34482

FEC ID number of contributing
federal political committee.

C

Name of Employer

Marion County

Occupation

Commissoner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 10 / 2015

Transaction ID : SA11AI.5676

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Lawrence Strack

Mailing Address 9600 SW 27th Ave.

City

Ocala

State

FL

Zip Code

34476

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 10 / 2015

Transaction ID : SA11AI.5692

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Stanley Tate

Mailing Address 1175 NE 125th Street

#102

City

Miami

State

FL

Zip Code

33161

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stanley Tate BuildersOccupation
President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2015

Transaction ID : SA11AI.4991

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Sachin Taywade

Mailing Address 8402 Ivy Mill Way

City

Tallahassee

State

FL

Zip Code

32312

FEC ID number of contributing
federal political committee.

C

Name of Employer
T Info SystemsOccupation
Software System Architect

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2015

Transaction ID : SA11AI.5815

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Dr. Kavita Thomas

Mailing Address 9471 S.W. 97th Street

City

Miami

State

FL

Zip Code

33176

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Physician

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2015

Transaction ID : SA11AI.5027

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Matthew Thomas

Mailing Address 3060 Silva Way

City

San Ramon

State

CA

Zip Code

94582

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Engineer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : SA11AI.5756

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Prem Thomas

Mailing Address 2 Gold Street
Apt. 2

City

New York

State

NY

Zip Code

10038

FEC ID number of contributing
federal political committee.

C

Name of Employer
GurusOccupation
Businessowner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : SA11AI.5573

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Melba Tillis

Mailing Address 1551 NE HWY 27A

City

Chiefland

State

FL

Zip Code

32626

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tillis FarmsOccupation
Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

Transaction ID : SA11AI.5706

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Terry Tillis

Mailing Address 1551 NE HWY 27

City

Chiefland

State

FL

Zip Code

32626

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Farmer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : SA11AI.5748

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Ajay Walia

Mailing Address 3790 Wentworth Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ace Info TechOccupation
IT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2015

Transaction ID : SA11AI.5813

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Patrick Weaver

Mailing Address 600 Wood Trail

City

Panama City

State

FL

Zip Code

32405

FEC ID number of contributing
federal political committee.

C

Name of Employer
McConaughayOccupation
Lawyer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2015

Transaction ID : SA11AI.5825

Amount of Each Receipt this Period

360.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1110.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Fredd Webb

A.

Mailing Address 1714 W. 23rd Street
Suite O

City	State	Zip Code
Panama City	FL	32408

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Business

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2015

Transaction ID : SA11AI.5605

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Fredd Webb

B.

Mailing Address 1714 W. 23rd Street
Suite O

City	State	Zip Code
Panama City	FL	32408

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Business

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1533.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2015

Transaction ID : SA11AI.5422

Amount of Each Receipt this Period

1033.00

In-kind - sign materials and labor

Full Name (Last, First, Middle Initial)

Fredd Webb

C.

Mailing Address 1714 W. 23rd Street
Suite O

City	State	Zip Code
Panama City	FL	32408

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Business

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2533.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2015

Transaction ID : SA11AI.5607

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2533.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Barry Webster

Mailing Address 350 Milestone Drive

City

Tallahassee

State

FL

Zip Code

32312

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
11 30 2015

Transaction ID : SA11AI.5637

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Donna Weeks

Mailing Address 683 North Court

City

Bronson

State

FL

Zip Code

32621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Munroe Regional

Occupation
Nurse

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
12 08 2015

Transaction ID : SA11AI.5798

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C.
Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

74104.78

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Friends of Cliff Stearns

Mailing Address P.O. Box 303

City

Silver Springs

State

FL

Zip Code

34488

FEC ID number of contributing
federal political committee.**C** C00229377

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

Transaction ID : SA11C.5088

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MADISON PROJECT INC.

Mailing Address PO BOX 655

City

ALEDO

State

TX

Zip Code

76008

FEC ID number of contributing
federal political committee.**C** C00298000

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11C.5191

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

MAGGIE'S LIST

Mailing Address 6675 WEEPING WILLOW WAY

City

TALLAHASSEE

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.**C** C00469023

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2015

Transaction ID : SA11C.4998

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

2500.00

TOTAL This Period (last page this line number only).....

2500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer
Self

Occupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 08 2015

Transaction ID : SA11D.5451

Amount of Each Receipt this Period

214.99

Computer for office, Best Buy, 1400 Apalachee PKWY,
Tallahassee, FL

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer
Self

Occupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 10 2015

Transaction ID : SA11D.5442

Amount of Each Receipt this Period

43.88

Gasoline, Chevron, 6932 Kirkman Road

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer
Self

Occupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 12 2015

Transaction ID : SA11D.5441

Amount of Each Receipt this Period

26.80

Gasoline, Shell, 3105 Apalachee, Tallahassee, FL

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 85

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.**C** H6FL02190Name of Employer
SelfOccupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		13		2015

Transaction ID : SA11D.5437

Amount of Each Receipt this Period

23.85

Gasoline, Pilot, 4255 NW HWY 3, Ocala, FL

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.**C** H6FL02190Name of Employer
SelfOccupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		13		2015

Transaction ID : SA11D.5448

Amount of Each Receipt this Period

26.54

Gasoline, Shell, 3105 Apalachee PKWY, Tallahassee, FL

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.**C** H6FL02190Name of Employer
SelfOccupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		19		2015

Transaction ID : SA11D.5439

Amount of Each Receipt this Period

31.89

Gasoline, Gate, 3571 Blirstone Road, Tallahassee

[MEMO ITEM]**SUBTOTAL** of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 15
12 13a 13b 14

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer

Self

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 21 2015

Transaction ID : SA11D.5434

Amount of Each Receipt this Period

26.59

Gasoline, Circle K, 2037 Thomasville Road,
Tallahassee, FL

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer

Self

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 29 2015

Transaction ID : SA11D.5449

Amount of Each Receipt this Period

24.65

Gasoline, Shell, 190 SW Chad Place, Lake City, FL

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer

Self

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 29 2015

Transaction ID : SA11D.5450

Amount of Each Receipt this Period

29.81

Gasoline, Shell, 3211 Mahan Drive, Tallahassee, FL

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.**C** H6FL02190

Name of Employer

Self

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2015

Transaction ID : SA11D.5438

Amount of Each Receipt this Period

67.87

Office supplies, Walmart, 3535 Apalachee PKWY,
Tallahassee, FL**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.**C** H6FL02190

Name of Employer

Self

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2015

Transaction ID : SA11D.5456

Amount of Each Receipt this Period

30.67

Gasoline, Shell, Miccosukee Road, Tallahassee

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.**C** H6FL02190

Name of Employer

Self

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2015

Transaction ID : SA11D.5440

Amount of Each Receipt this Period

25.78

Gasoline, Loves, 2510 HWY 231, Cottondale, FL

[MEMO ITEM]**SUBTOTAL** of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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12 13a 13b 14

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Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer
Self

Occupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M / D D / Y Y Y Y
11 18 2015

Transaction ID : SA11D.5453

Amount of Each Receipt this Period

22.25

Gasoline, Gate, 3571 Blairstone Road, Tallahassee, FL

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer
Self

Occupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M / D D / Y Y Y Y
11 21 2015

Transaction ID : SA11D.5455

Amount of Each Receipt this Period

25.43

Gasoline, Citgo, 3305 Capital Cir, Tallahassee

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer
Self

Occupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M / D D / Y Y Y Y
11 23 2015

Transaction ID : SA11D.5454

Amount of Each Receipt this Period

20.77

Gasoline, Shell, 3105 Apalachee PKWY, Tallahassee, FL

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer
SelfOccupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2015

Transaction ID : SA11D.5452

Amount of Each Receipt this Period

23.72

Gasoline, Gate, 3571 Blairstone Road, Tallahassee, FL

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer
SelfOccupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2015

Transaction ID : SA11D.5460

Amount of Each Receipt this Period

26.59

Gasoline, Pilot, 2209 HWY 71, Marianna, FL

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer
SelfOccupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		03		2015

Transaction ID : SA11D.5458

Amount of Each Receipt this Period

28.93

Gasoline, Murphy USA, 2253 HWY, 71s, Marianna, FL

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer

Self

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 04 2015

Transaction ID : SA11D.5459

Amount of Each Receipt this Period

20.03

Gasoline, Jiffy, 1025 N. Young Blvd., Chiefland, FL

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer

Self

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 12 2015

Transaction ID : SA11D.5461

Amount of Each Receipt this Period

34.99

Gasoline, Fast Track, 5200 S. Jefferson St., Lamont, FL

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer

Self

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 13 2015

Transaction ID : SA11D.5457

Amount of Each Receipt this Period

21.04

Gasoline McKenzie Markets, 2315 Capital Cir.,
Tallahassee

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 52 OF 85

☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 15
12 13a 13b 14

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer
Self

Occupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

33269.80

Date of Receipt

M M / D D / Y Y Y Y Y
12 15 2015

Transaction ID : SA11D.5462

Amount of Each Receipt this Period

45.05

Donor Lunch, BJ's, Apalachee PKWY, Tallahassee,

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B.
Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.
Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

0.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 11d
12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

Mary Thomas

Mailing Address 2482 Goldenrod Way

City

Tallahassee

State

FL

Zip Code

32311

FEC ID number of contributing
federal political committee.

C H6FL02190

Name of Employer
Self

Occupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

53269.80

Date of Receipt

M M / D D / Y Y Y Y
12 30 2015

Transaction ID : SA13A.5205

Amount of Each Receipt this Period

20000.00

Personal Loan

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

20000.00

20000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5467

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		10		2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5468

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2015

Amount of Each Disbursement this Period

5.17

Transaction ID : SB17.5469

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

13.57

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		08		2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5473

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		10		2015

Amount of Each Disbursement this Period

1.08

Transaction ID : SB17.5474

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		10		2015

Amount of Each Disbursement this Period

1.08

Transaction ID : SB17.5475

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6.36

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5476

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2015

Amount of Each Disbursement this Period

39.30

Transaction ID : SB17.5477

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		18		2015

Amount of Each Disbursement this Period

10.05

Transaction ID : SB17.5478

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

53.55

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		18		2015

Amount of Each Disbursement this Period

2.25

Transaction ID : SB17.5479

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		18		2015

Amount of Each Disbursement this Period

1.27

Transaction ID : SB17.5480

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2015

Amount of Each Disbursement this Period

2.25

Transaction ID : SB17.5481

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5.77

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2015

Amount of Each Disbursement this Period

3.22

Transaction ID : SB17.5482

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2015

Amount of Each Disbursement this Period

2.25

Transaction ID : SB17.5483

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2015

Amount of Each Disbursement this Period

10.05

Transaction ID : SB17.5484

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

15.52

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2015

Amount of Each Disbursement this Period

2.25

Transaction ID : SB17.5505

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2015

Amount of Each Disbursement this Period

29.55

Transaction ID : SB17.5506

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2015

Amount of Each Disbursement this Period

39.30

Transaction ID : SB17.5507

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

71.10

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 61 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5508

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		07		2015

Amount of Each Disbursement this Period

1.27

Transaction ID : SB17.5509

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

10.05

Transaction ID : SB17.5511

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

15.52

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 62 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2015

Amount of Each Disbursement this Period

1.08

Transaction ID : SB17.5512

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2015

Amount of Each Disbursement this Period

2.25

Transaction ID : SB17.5513

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2015

Amount of Each Disbursement this Period

2.25

Transaction ID : SB17.5514

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5.58

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		13		2015

Amount of Each Disbursement this Period

10.05

Transaction ID : SB17.5515

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		13		2015

Amount of Each Disbursement this Period

10.05

Transaction ID : SB17.5516

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		13		2015

Amount of Each Disbursement this Period

10.05

Transaction ID : SB17.5517

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

30.15

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 64 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		14		2015

Amount of Each Disbursement this Period

10.05

Transaction ID : SB17.5518

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		14		2015

Amount of Each Disbursement this Period

8.10

Transaction ID : SB17.5519

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5520

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

22.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 65 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2015

Amount of Each Disbursement this Period

7.32

Transaction ID : SB17.5522

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		20		2015

Amount of Each Disbursement this Period

7.32

Transaction ID : SB17.5523

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		20		2015

Amount of Each Disbursement this Period

7.32

Transaction ID : SB17.5524

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

21.96

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		21		2015

Amount of Each Disbursement this Period

39.80

Transaction ID : SB17.5525

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		21		2015

Amount of Each Disbursement this Period

39.30

Transaction ID : SB17.5526

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		21		2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5527

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

63.30

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		22		2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5528

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		28		2015

Amount of Each Disbursement this Period

2.25

Transaction ID : SB17.5529

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		28		2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5530

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

10.65

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 69 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5534

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

Amount of Each Disbursement this Period

8.10

Transaction ID : SB17.5535

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106

City Baton Rouge State LA Zip Code 70808

Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

Amount of Each Disbursement this Period

8.10

Transaction ID : SB17.5536

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

20.40

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5537

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5538

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5539

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

12.60

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

69.93

Transaction ID : SB17.5540

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

10.05

Transaction ID : SB17.5541

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

1.08

Transaction ID : SB17.5542

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

69.93

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
12	31	2015

Amount of Each Disbursement this Period

1.08

Transaction ID : SB17.5543

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
12	31	2015

Amount of Each Disbursement this Period

19.80

Transaction ID : SB17.5544

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
12	31	2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5545

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

25.08

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

1.08

Transaction ID : SB17.5546

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

10.05

Transaction ID : SB17.5547

C. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

19.80

Transaction ID : SB17.5548

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

30.93

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5549

B. AnedotMailing Address 5555 Hilton Ave.
Ste. 106City State Zip Code
Baton Rouge LA 70808Purpose of Disbursement
Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

Amount of Each Disbursement this Period

10.05

Transaction ID : SB17.5550

c. Delta Air Lines

Mailing Address P.O. Box 20980

City State Zip Code
Atlanta GA 30320Purpose of Disbursement
Airfare

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2015

Amount of Each Disbursement this Period

1685.20

Transaction ID : SB17.5400

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1699.45

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 75 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. Extensive EenterprisesMailing Address 204 37th Avenue North
#182City State Zip Code
St. Petersburg FL 33704

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2015

Amount of Each Disbursement this Period

2250.00

Transaction ID : SB17.5356

B. William Galivan

Mailing Address 337 Beaver Lake Road

City State Zip Code
Tallahassee FL 32312Purpose of Disbursement
Paycheck

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2015

Amount of Each Disbursement this Period

377.49

Transaction ID : SB17.5409

c. William Galivan

Mailing Address 337 Beaver Lake Road

City State Zip Code
Tallahassee FL 32312Purpose of Disbursement
Paycheck

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		16		2015

Amount of Each Disbursement this Period

160.49

Transaction ID : SB17.5415

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2787.98

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. William Galivan

Mailing Address 337 Beaver Lake Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2015

City	State	Zip Code
Tallahassee	FL	32312

Amount of Each Disbursement this Period

679.49

Purpose of Disbursement
PaycheckCategory/
Type

Transaction ID : SB17.5411

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Gandy's Printers

Mailing Address 1800 South Monroe Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2015

City	State	Zip Code
Tallahassee	FL	32301

Amount of Each Disbursement this Period

57.04

Purpose of Disbursement
PrintingCategory/
Type

Transaction ID : SB17.5418

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Golden Corral

Mailing Address 105 E. 23rd Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2015

City	State	Zip Code
Panama City	FL	32405

Amount of Each Disbursement this Period

373.38

Purpose of Disbursement
Meet and Greet LuncheonCategory/
Type

Transaction ID : SB17.5387

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1109.91

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 77 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. Lauren Henderson

Mailing Address 2047 Doomar Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2015

City	State	Zip Code
Tallahassee	FL	32308

Amount of Each Disbursement this Period

1056.99

Purpose of Disbursement
PayrollCategory/
Type

Transaction ID : SB17.5352

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Lauren Henderson

Mailing Address 2047 Doomar Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2015

City	State	Zip Code
Tallahassee	FL	32308

Amount of Each Disbursement this Period

197.29

Purpose of Disbursement
ReimbursementsCategory/
Type

Transaction ID : SB17.5355

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Lauren Henderson

Mailing Address 2047 Doomar Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2015

City	State	Zip Code
Tallahassee	FL	32308

Amount of Each Disbursement this Period

1056.99

Purpose of Disbursement
PaycheckCategory/
Type

Transaction ID : SB17.5405

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2311.27

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 85

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. Lauren Henderson

Mailing Address 2047 Doomar Drive

City	State	Zip Code
Tallahassee	FL	32308

Purpose of Disbursement
Reimbursements

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2015

Amount of Each Disbursement this Period

94.00

Transaction ID : SB17.5407

B. Lauren Henderson

Mailing Address 2047 Doomar Drive

City	State	Zip Code
Tallahassee	FL	32308

Purpose of Disbursement
Paycheck

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2015

Amount of Each Disbursement this Period

1056.99

Transaction ID : SB17.5408

C. iDonate Pro

Mailing Address 2033 San Elijo Avenue #203

City	State	Zip Code
Cardiff by the Sea	CA	92007

Purpose of Disbursement
Database Program

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		16		2015

Amount of Each Disbursement this Period

375.00

Transaction ID : SB17.5386

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1525.99

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. iDonate Pro

Mailing Address 2033 San Elijo Avenue #203

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2015

City	State	Zip Code
Cardiff by the Sea	CA	92007

Amount of Each Disbursement this Period

375.00

Purpose of Disbursement
Database ProgramCategory/
Type

Transaction ID : SB17.5397

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Jackson Alvarez Group

Mailing Address 7777 Leesburg Pike

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		02		2015

City	State	Zip Code
Falls Church	VA	22043

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
ConsultingCategory/
Type

Transaction ID : SB17.5413

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Jamestown Associates

Mailing Address 116 Craig Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2015

City	State	Zip Code
Manalapan	NJ	07726

Amount of Each Disbursement this Period

4506.25

Purpose of Disbursement
Design and PrintingCategory/
Type

Transaction ID : SB17.5404

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

5881.25

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. Jamestown Associates

Mailing Address 116 Craig Road

City	State	Zip Code
Manalapan	NJ	07726

Purpose of Disbursement
Design, print and mail

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2015

Amount of Each Disbursement this Period

2650.00

Transaction ID : SB17.5421

B. Dr. David McKalip

Mailing Address 1078 42nd Ave. North

City	State	Zip Code
St. Petersburg	FL	33703

Purpose of Disbursement
In-kind - Food and drinks for fundraiser

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2015

Amount of Each Disbursement this Period

262.58

Transaction ID : SB17.5425

C. Joseph D. Mitchell

Mailing Address 251 Remington Green Circle

City	State	Zip Code
Tallahassee	FL	32308

Purpose of Disbursement
In-kind - Food and beverage for fundraiser

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2015

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.5464

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3212.58

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. Carolyn Parlato

Mailing Address 1529 Crestview Ave.

City	State	Zip Code
Tallahassee	FL	32303

Purpose of Disbursement
In-kind - food and beverage for meet and greet

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2015

Amount of Each Disbursement this Period

275.00

Transaction ID : SB17.5466

B. Pamela Perry

Mailing Address 5431 Hopetown Lane

City	State	Zip Code
Panama City	FL	32408

Purpose of Disbursement
In-kind - food and drinks for fundraiser

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2015

Amount of Each Disbursement this Period

645.12

Transaction ID : SB17.5427

C. Republican Party of Florida

Mailing Address 420 E. Jefferson Street

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement
Sunshine Summit Tickets and Lodging

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2015

Amount of Each Disbursement this Period

524.95

Transaction ID : SB17.5374

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1445.07

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. Jeffrey and Jamie Siegmeister

Mailing Address 2637 145th Road

City	State	Zip Code
Live Oak	FL	32060

Purpose of Disbursement
In-kind - Food, beverage and invitations for meet and greet

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 17 / 2015

Amount of Each Disbursement this Period

1028.08

Transaction ID : SB17.5432

B. Dr. Kavita Thomas

Mailing Address 9471 S.W. 97th Street

City	State	Zip Code
Miami	FL	33176

Purpose of Disbursement
Refund of contribution over the limit

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 09 / 2015

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.5420

c. U.S. Post Master

Mailing Address 2800 South Adams Street

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement
Postage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 20 / 2015

Amount of Each Disbursement this Period

1045.00

Transaction ID : SB17.5416

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2673.08

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mary Thomas for Congress

Full Name (Last, First, Middle Initial)

A. Fredd WebbMailing Address 1714 W. 23rd Street
Suite OCity State Zip Code
Panama City FL 32408Purpose of Disbursement
In-kind - sign materials and labor

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		14		2015

Amount of Each Disbursement this Period

1033.00

Transaction ID : SB17.5423

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1033.00

24254.48

SCHEDULE C (FEC Form 3)
LOANS

PAGE 84 OF 85

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4519

Mary Thomas for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

Mary Thomas

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2482 Goldenrod Way

City

State

ZIP Code

Tallahassee

FL

32311

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 25 / 2015

Date Due

M M / D D / Y Y Y Y
/ / N/A

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

25000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 85 OF 85

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5205

Mary Thomas for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2016

Mary Thomas

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2482 Goldenrod Way

City

State

ZIP Code

Tallahassee

FL

32311

Original Amount of Loan

20000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20000.00

TERMS

Date Incurred

M M / D D / Y Y
12 / 30 / 2015

Date Due

M M / D D / Y Y
N/A

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

20000.00

TOTALS This Period (last page in this line only)..... ►

45000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.